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## Filing Date Application Number 10/6/8067 Applicant(s) MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06) May be used for additional claims or amendments 3-22-06 AFTER SECOND AFTER FIRST CLAIMS AS FILED Indep Depend AMENDMENT Indep Depend Indep Depend AMENDMENT Indep Depend Depend Indep Depend Indep 53 \_\_\_ 23 Total Indep Total Total indep Depend Total Total Depend Claims Total

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